NOTES FROM THE CURRICULUM MANAGEMENT AND POLICY STEERING COMMITTEE MEETING

August 8, 2002 at 7:30 a.m. in 238 MacNider

Members Present/Absent: McCartney, Chair; Drs. Aleman, Chaney, Dent, Gwyther, Hoole, Ingersoll, Rao, Shaheen, Tresolini, Yankaskas; Lewis; Regrets: Ingersoll, Chaney

2. **Barriers to Curriculum Reform** (Dr. McCartney) The barriers were attributable to lack of funding. A handout, Funding Needs of Offices of Medical Education, was distributed.
3. **Final Annual Committee Reports** were distributed for review and can be used to identify agenda items for future CMPC meetings. These will be the agenda for September CAB.
4. **Deadline for Posting Syllabus and other curriculum materials online** (Dr. McCartney) The Educational Technology Group notified Dr. McCartney that several courses were late in submitting syllabus materials for posting to the web. The development of a procedure with clear deadlines for submitting materials and expectations of compliance of all faculty/course directors was proposed. E. Juliano should be invited to (1) clarify technical aspects for posting curricular materials to develop a timeline, and (2) participate in developing guidelines. Official communiqué to course directors (with consequences) should introduce these procedures and may include a citation from *Responsibilities of Teaching Faculty* (document to be shared at future CMPC meeting).
5. **Benefits of the Leadership Task Force** (partial list):
   - Governance structure is clarified and simplified.
   - The fourth year is identified as the most variable (and flexible) year, and is targeted for improvement.
   - Idea to assign a longitudinal advisor, although some students are self-starters and succeed in getting mentoring from multiple appropriate resources.
   - The need for integration is clearly recognized.
   - Core Competencies for the School of Medicine are now defined and are already being used as a framework for making curricular decisions.
   - Creation of CMPC improved communication, building programs, and governance of the curriculum.
6. **Appointment Promotion and Tenure Policy** There has not yet been a revision of former document to incorporate recently approved changes proposed by the Orringer Committee. CMPC will review these two documents to see if we can suggest wording that will strengthen recognition and credit for teaching. CMPC discussed the need for awards and credit for time invested. In consultation with Dr. Runge and the Leadership Task Force, CMPC may be able to gain their support in order to get recognition for teachers. One method would be the use of a grid recording faculty effort distribution, such as the one used in Family Medicine (Dr. Gwyther).
7. **International Association of Medical Science Education: Summary of Discipline-Based Curriculum**: Dr. Dent summarized faculty concerns in each basic science discipline. (Handout for next meeting). Example concerns:
   - Anatomy – placement in curriculum, decrease use of microscopes, few new faculty being trained
   - Biochemistry – diverse student preparation, teaching as an undervalued pursuit, lack of good textbooks
   - Pathology – difficulty in attracting graduates to academic medicine; trend toward virtual microscopy
   - Integration continues to be major topic of discussion.
8. **Future Agenda Items**: The most effective way to run a course; feasibility of standardizing clerkships.

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<thead>
<tr>
<th>Action Item</th>
<th>Who Will Do</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Report for Outcomes Task Force re positive outcomes of their efforts, and barriers to curricular changes</td>
<td>Dr. McCartney</td>
<td>August 22, 2002</td>
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<td>Sample teaching grid that shows expectations</td>
<td>Dr. Gwyther</td>
<td>August 22, 2002</td>
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<tr>
<td><em>Responsibilities of Teaching Faculty</em> (from Educational Policies)</td>
<td>Dr. McCartney</td>
<td>August 22, 2002</td>
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